

# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000010272

FILED  
Aug 29, 2008  
Secretary of State

Entity Name: JUSTICE SPRING HILL COLLISION, INC.

## Current Principal Place of Business:

1190 WENDY CT.  
SPRING HILL, FL 34607

## New Principal Place of Business:

## Current Mailing Address:

1190 WENDY CT  
SPRINGHILL, FL 34607

## New Mailing Address:

FEI Number: 59-3493577

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JUSTICE, MARK  
1190 WENDY CT.  
SPRING HILL, FL 34607 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: JUSTICE, MARK  
Address: 1190 WENDY CT  
City-St-Zip: SPRINGHILL, FL 34607

Title: D ( ) Delete  
Name: JUSTICE, JOSEPH  
Address: 1190 WENDY CT  
City-St-Zip: SPRINGHILL, FL 34607 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: JUSTICE, DECEMBER  
Address: 396 NORTH AVE.  
City-St-Zip: BROOKSVILLE, FL 34601

Title: D ( ) Change (X) Addition  
Name: CAPONI, MICHAEL  
Address: 2486 RUNNING OAK CT  
City-St-Zip: SPRING HILL, FL 34608

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK JUSTICE

D

08/29/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date